

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 64														
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">MS / MRS / MR Mrs</td> <td style="width:25%; padding: 2px;">FIRST Teri</td> <td style="width:25%; padding: 2px;">MI M</td> </tr> <tr> <td style="padding: 2px;">.....</td> <td style="padding: 2px;">LAST Castillo</td> <td style="padding: 2px;">SUFFIX</td> </tr> <tr> <td style="padding: 2px;">NICKNAME</td> <td colspan="2"></td> </tr> </table>	MS / MRS / MR Mrs	FIRST Teri	MI M	LAST Castillo	SUFFIX	NICKNAME			<div style="text-align: center; border: 1px solid black; padding: 2px;">OFFICE USE ONLY</div> <div style="padding: 2px;">Date Received</div> <hr/> <div style="padding: 2px;">Date Hand-delivered or Date Postmarked</div> <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;">Receipt #</td> <td style="width:50%; padding: 2px;">Amount \$</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Imaged</td> </tr> </table>	Receipt #	Amount \$	Date Processed		Date Imaged	
MS / MRS / MR Mrs	FIRST Teri	MI M															
.....	LAST Castillo	SUFFIX															
NICKNAME																	
Receipt #	Amount \$																
Date Processed																	
Date Imaged																	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 521 Torreon St San Antonio TX 78207																
5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">AREA CODE (210)</td> <td style="width:50%; padding: 2px;">PHONE NUMBER 464-4254</td> <td style="width:25%; padding: 2px;">EXTENSION</td> </tr> </table>	AREA CODE (210)	PHONE NUMBER 464-4254	EXTENSION													
AREA CODE (210)	PHONE NUMBER 464-4254	EXTENSION															
6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">MS / MRS / MR</td> <td style="width:25%; padding: 2px;">FIRST Joe</td> <td style="width:25%; padding: 2px;">MI</td> </tr> <tr> <td style="padding: 2px;">.....</td> <td style="padding: 2px;">LAST</td> <td style="padding: 2px;">SUFFIX</td> </tr> <tr> <td style="padding: 2px;">NICKNAME</td> <td colspan="2"></td> </tr> <tr> <td colspan="3" style="padding: 2px; text-align: center;">Castillo</td> </tr> </table>	MS / MRS / MR	FIRST Joe	MI	LAST	SUFFIX	NICKNAME			Castillo						
MS / MRS / MR	FIRST Joe	MI															
.....	LAST	SUFFIX															
NICKNAME																	
Castillo																	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 303 Cass Ave San Antonio TX 78204																
8 CAMPAIGN TREASURER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 2px;">AREA CODE (210)</td> <td style="width:50%; padding: 2px;">PHONE NUMBER 279-6751</td> <td style="width:25%; padding: 2px;">EXTENSION</td> </tr> </table>	AREA CODE (210)	PHONE NUMBER 279-6751	EXTENSION													
AREA CODE (210)	PHONE NUMBER 279-6751	EXTENSION															
9 REPORT TYPE	January 15: Semi-Annual																
10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">Month Day Year</td> <td style="width:33%; text-align: center;">THROUGH</td> <td style="width:33%; text-align: center;">Month Day Year</td> </tr> <tr> <td style="text-align: center;">7/1/2022</td> <td></td> <td style="text-align: center;">12/31/2022</td> </tr> </table>	Month Day Year	THROUGH	Month Day Year	7/1/2022		12/31/2022										
Month Day Year	THROUGH	Month Day Year															
7/1/2022		12/31/2022															
11 ELECTION	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; padding: 2px;">ELECTION DATE</td> <td style="width:60%; padding: 2px;">ELECTION TYPE</td> </tr> <tr> <td style="padding: 2px;">Month Day Year</td> <td style="padding: 2px;"> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description </td> </tr> <tr> <td style="text-align: center; padding: 2px;">5/6/2023</td> <td></td> </tr> </table>	ELECTION DATE	ELECTION TYPE	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description	5/6/2023											
ELECTION DATE	ELECTION TYPE																
Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description																
5/6/2023																	
12 OFFICE	OFFICE HELD (if any) Council District 5	13 OFFICE SOUGHT (if known) Council District 5															

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mrs Teri M Castillo	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 297.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14862.69
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5292.86
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 17876.51
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3500.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mrs Teri M Castillo, this the 17th day of January, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Mrs Teri M Castillo		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 14862.69
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 5292.86
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
7/7/2022

5 Full name of contributor out-of-state PAC (ID# _____)
James Long

7 Amount of contribution (\$)
17.00

6 Contributor address; City; State; Zip Code
**2508 Tampico Street
San Antonio, TX 78207**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
SAISD

Date
7/14/2022

Full name of contributor out-of-state PAC (ID# _____)
Brent Biglin

Amount of contribution (\$)
47.00

Contributor address; City; State; Zip Code
**419 Rosa Verde
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Designer

Employer (See instructions)
Dell

Date
7/15/2022

Full name of contributor out-of-state PAC (ID# _____)
Brittany Sharp

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13638 Mason crest Dr
San antonio, TX 78247**

Principal occupation / Job title (See instructions)
Social Work

Employer (See instructions)
Martinez Street Women's Center

Date
7/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
6.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 7/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Graham 6 Contributor address; City; State; Zip Code 1811 Oak St. North Aurora, IL 60542	7 Amount of contribution (\$) 1.11
8 Principal occupation / Job title (See instructions) Teacher		9 Employer (See instructions) DeKalb high school
Date 8/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Francesca Rattray Contributor address; City; State; Zip Code 232 West Lullwood Ave. San Antoni, TX 78212	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Nonprofit		Employer (See instructions) Nonprofit
Date 8/7/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Long Contributor address; City; State; Zip Code 2508 Tampico Street San Antonio, TX 78207	Amount of contribution (\$) 17.00
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) SAISD
Date 8/8/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Frank Burney Contributor address; City; State; Zip Code 112 E. Pecan St. #1616 San Antonio, TX 78205	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) Martin & Drought P.C.



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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
8/10/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Matteo Trevino

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**102 Paul St
San Antonio, TX 78203**

8 Principal occupation / Job title (See instructions)
Council Aide

9 Employer (See instructions)
San Antonio City Council

Date
8/14/2022

Full name of contributor out-of-state PAC (ID# _____)
Brent Biglin

Amount of contribution (\$)
47.00

Contributor address; City; State; Zip Code
**419 Rosa Verde
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Designer

Employer (See instructions)
Dell

Date
8/15/2022

Full name of contributor out-of-state PAC (ID# _____)
Brittany Sharp

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13638 Mason crest Dr
San antonio, TX 78247**

Principal occupation / Job title (See instructions)
Social Work

Employer (See instructions)
Martinez Street Women's Center

Date
8/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
6.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
8/23/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Gina Cramer

7 Amount of contribution (\$)
10.00

6 Contributor address; City; State; Zip Code
**2234 Fresno Street
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)
Data Analyst

9 Employer (See instructions)
META Consultants

Date
8/24/2022

Full name of contributor out-of-state PAC (ID# _____)
Andrew Murphy

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**1200 Lockhill-Selma Rd
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Development Coordinator

Employer (See instructions)
KIPP San Antonio

Date
8/30/2022

Full name of contributor out-of-state PAC (ID# _____)
Tom LaGatta

Amount of contribution (\$)
150.00

Contributor address; City; State; Zip Code
**35 Essex St
New York, NY 10002**

Principal occupation / Job title (See instructions)
Sales Engineer

Employer (See instructions)
Splunk

Date
8/31/2022

Full name of contributor out-of-state PAC (ID# _____)
Colton Uden

Amount of contribution (\$)
5.00

Contributor address; City; State; Zip Code
**100 N Santa Rosa St #620
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Student

Employer (See instructions)
UTSA

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 9/7/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Long	7 Amount of contribution (\$) 17.00
	6 Contributor address; City; State; Zip Code 2508 Tampico Street San Antonio, TX 78207	
8 Principal occupation / Job title (See instructions) Teacher		9 Employer (See instructions) SAISD
Date 9/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brittany Sharp	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 13638 Mason crest Dr San antonio, TX 78247	
Principal occupation / Job title (See instructions) Social Work		Employer (See instructions) Martinez Street Women's Center
Date 9/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amador Salazar	Amount of contribution (\$) 6.00
	Contributor address; City; State; Zip Code 6503 Arrid Pass San Antonio, TX 78238	
Principal occupation / Job title (See instructions) Graduate Student		Employer (See instructions) University of Texas at San Antonio4670
Date 9/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colton Uden	Amount of contribution (\$) 5.00
	Contributor address; City; State; Zip Code 100 N Santa Rosa St #620 San Antonio, TX 78207	
Principal occupation / Job title (See instructions) Student		Employer (See instructions) UTSA

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/7/2022

5 Full name of contributor out-of-state PAC (ID# _____)
James Long

7 Amount of contribution (\$)
17.00

6 Contributor address; City; State; Zip Code
**2508 Tampico Street
San Antonio, TX 78207**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
SAISD

Date
10/7/2022

Full name of contributor out-of-state PAC (ID# _____)
Stephen Versteeg

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**105 Reno St
San Antonio, TX 78208**

Principal occupation / Job title (See instructions)
Engineer

Employer (See instructions)
FBD

Date
10/12/2022

Full name of contributor out-of-state PAC (ID# _____)
Pedro Rocha

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**8515 Romney
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)
Cyber Security

Employer (See instructions)
Pedro Rocha

Date
10/15/2022

Full name of contributor out-of-state PAC (ID# _____)
Brittany Sharp

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13638 Mason crest Dr
San antonio, TX 78247**

Principal occupation / Job title (See instructions)
Social Work

Employer (See instructions)
Martinez Street Women's Center

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alberto Jacinto	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 126 Adelpia San Antonio, TX 78214		
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nikki Kesh	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 135 Babcock Rd San Antonio, TX 78201		
Principal occupation / Job title (See instructions) Self		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yvette Changuin	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 236 E Cevallos st San Antonio, TX 78204		
Principal occupation / Job title (See instructions) attorney		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephanie Juarez	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 444 Eldridge Ave San Antonio, TX 78237		
Principal occupation / Job title (See instructions) Quality Control		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Danielle howell

7 Amount of contribution (\$)
5.00

6 Contributor address; City; State; Zip Code
**607 Broadway
San Antonio, TX 78215**

8 Principal occupation / Job title (See instructions)
Quality Control

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Erin Hahn

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**423 Blue Star
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Housing

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Mia Loseff

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**304 Flinston Pl
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Housing

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Marco Acuna

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**608 Rosewood Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Ogranizer

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jessica Nikolson	7 Amount of contribution (\$) 55.00
6 Contributor address; City; State; Zip Code 608 Rosewood Ave San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions) Project Democracy		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chad Carey	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 102 East Huisache Avenue San Antonio, TX 78212		
Principal occupation / Job title (See instructions) Bar Owner		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnathan Tellez	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 630 W Dorothy Pl San Antonio, TX 78210		
Principal occupation / Job title (See instructions) PF1		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Demanche	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 1031 W Russell Pl San Antonio, TX 78212		
Principal occupation / Job title (See instructions) Natinal Association		Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ray Morales	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 203 Medford Dr. San Antonio, TX 78209		
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miguel Delgado	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 815 Plainview San Antonio, TX 78228		
Principal occupation / Job title (See instructions) Retired		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Monica Delgado	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 518 Lookout Dr San Antonio, TX 78228		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eduardo Saavedra	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 615 Naylor St San Antonio, TX 78210		
Principal occupation / Job title (See instructions) Self Employed		Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Alejandro Fuentes Valdez III

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**9939 Fredericksburg rd
San Antonio, TX 78204**

8 Principal occupation / Job title (See instructions)
Sous Resturant

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Shelia Morales

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**203 Medford Dr
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Irma Solis

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3011 White Tail
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Kat Hussin

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**1107 W Lynwood Ave
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
RAICES

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Miguel Barrentos

7 Amount of contribution (\$)
30.00

6 Contributor address; City; State; Zip Code
**13031 Prarie Crossing
San Antonio, TX 78211**

8 Principal occupation / Job title (See instructions)
Programer

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Isac Guitron

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**202 Noames
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
El Ojo

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Joe Castillo

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**303 Cass Avn
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Walgreens

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Erika Nahejar

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**1114 NW 27th
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
Sub

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew Garcia	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 610 Mistletoe Ave San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions) attorney		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justin Tullis	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 218 Avant Ave San Antonio, TX 78210		
Principal occupation / Job title (See instructions) lawyer		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernando Aguilar	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 206 Wake forest San Antonio, TX 78228		
Principal occupation / Job title (See instructions) Organizer		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anthony Culpepper	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 221 W Mangolia San Antonio, TX 78212		
Principal occupation / Job title (See instructions) Planning		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Sarah Donaldson

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**615 Naylor St
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)
attorney

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Jessica Chavez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**10376 Saltwater
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
HISD

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Savana Garcia

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**12222 Vance Jackson
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
self

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Kelly Hubler

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2422 Monterey St
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Medical

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Teresa Castillo 6 Contributor address; City; State; Zip Code 303 Cass Avn San Antonio, TX 78204	7 Amount of contribution (\$) 60.00
8 Principal occupation / Job title (See instructions) self		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Teresa Canadles Contributor address; City; State; Zip Code 474 E French Place San Antonio, TX 78212	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Self		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aracely Rodriguez Contributor address; City; State; Zip Code 333 W Cevallos St San Antonio, TX 78204	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hillary Woodhouse Contributor address; City; State; Zip Code 1914 St Marys St San Antonio, TX 78212	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Lonesome Rose		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Danny Delgado

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**2722 W Huisache Ave
San Antonio, TX 78228**

8 Principal occupation / Job title (See instructions)
Hi Tones

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Alan Codd

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**274 BARBARA DR
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Faust

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Omar Garcia

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**1502 Sunbend Falls
San Antonio, TX 78224**

Principal occupation / Job title (See instructions)
student

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
6.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Natalie Clifford

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**514 Westwood Drive
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Jackie Campos

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**3811 Meeks Avenue
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
TFN

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Amber Castillo

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**303 Cass Ave.
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Self Employed

Employer (See instructions)

Date
10/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Roberto Rios

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**1618 Oblate Drive
Canyon Lake, TX 78133**

Principal occupation / Job title (See instructions)
Communication

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bryan Ramirez	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 218 Clifford Dr San Antonio, TX 78210		
8 Principal occupation / Job title (See instructions) Idea		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Licia Centurion	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 1212 Mcilvaine San Antonio, TX 78201		
Principal occupation / Job title (See instructions) Legal Assistant		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justice Lovin	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 624 W Mangolia ave San Antonio, TX 78212		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sara Garcia	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 18200 Blanco Springs San Antonio, TX 78258		
Principal occupation / Job title (See instructions) Tech		Employer (See instructions)



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amador Salazar	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 2242 Fresno St San Antonio, TX 78201		
8 Principal occupation / Job title (See instructions) COSA D5		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myra Mendoza	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 403 Linares St San Antonio, TX 78225		
Principal occupation / Job title (See instructions) UT Health		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justin Renteria	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 443 Beverly Dr San Antonio, TX 78228		
Principal occupation / Job title (See instructions) cosa ccd5		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raul Gomez	Amount of contribution (\$) 40.00
Contributor address; City; State; Zip Code 403 Helena St San Antonio, TX 78204		
Principal occupation / Job title (See instructions) BCDCP		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 20 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Venus Woodworth	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 203 Mangolia Ave #3 San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions) Fairshot Tx PAC		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lizbeth Para Davila	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 602 Faust Ave San Antonio, TX 78206		
Principal occupation / Job title (See instructions) TRLA		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sarah Zimmerman	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 454 Brighton Ave San Antonio, TX 78214		
Principal occupation / Job title (See instructions) SAISD		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Torres	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 110 Endinberg San Antonio, TX 78210		
Principal occupation / Job title (See instructions) us army		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salena Ramirez	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code 110 Endinberg San Antonio, TX 78210		
8 Principal occupation / Job title (See instructions) ssisd		9 Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saul Hernandez	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 4111 W Baylor St San Antonio, TX 78204		
Principal occupation / Job title (See instructions) Idea schools		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jessica Gutierrez	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code 13413 Arryo Seco San Antonio, TX 78223		
Principal occupation / Job title (See instructions) ssisd		Employer (See instructions)
Date 10/17/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juan Gomez	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code 158 Mebane st San Antonio, TX 78223		
Principal occupation / Job title (See instructions) Self		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
22 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
10/21/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Katy Bravenec

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**501 Shook Ave
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Chief of Staff

9 Employer (See instructions)
City of San Antonio District 5

Date
10/22/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

Date
10/22/2022

Full name of contributor out-of-state PAC (ID# _____)
Paul Demanche

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1031 W Russell Pl
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
N/A

Employer (See instructions)
N/A

Date
10/22/2022

Full name of contributor out-of-state PAC (ID# _____)
Rohit Upadhya

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**4437 Holt Street
Union City, CA 94587**

Principal occupation / Job title (See instructions)
engineer

Employer (See instructions)
Bandera Electric Cooperative

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 23 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carol Agüero	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code 102 Rosemary San Antonio, TX 78209		
8 Principal occupation / Job title (See instructions) Paralegal		9 Employer (See instructions) Undisclosed
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) stacy evans	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 111 Probandt #512 San Antonio, TX 78204		
Principal occupation / Job title (See instructions) Faculty		Employer (See instructions) ACD
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Justin Renteria	Amount of contribution (\$) 40.00
Contributor address; City; State; Zip Code 343 langford place San antonio, TX 78221		
Principal occupation / Job title (See instructions) Policy aide		Employer (See instructions) COSA
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sofia Lopez	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 1031 W Russel PI San Antonio, TX 78213		
Principal occupation / Job title (See instructions) Organizer		Employer (See instructions) ACRE

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 24 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Javier Patlan	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 7626 BLUESAGE CV San Antonio, TX 78249		
8 Principal occupation / Job title (See instructions) Firefighter		9 Employer (See instructions) SAFD
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Delgado	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 4018 Barrington San Antonio, TX 78217		
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Tamusa
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayra Mendoza	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 403 Linares St San Antonio, TX 78225		
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) UT Health
Date 10/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alejandra Lopez	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 118 Arlington Ct San Antonio, TX 78210		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) San Antonio Ind. School District

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jessica O Guerrero	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 111 Christine Dr San Antonio, TX 78223		
8 Principal occupation / Job title (See instructions) Community Resources Coordinator		9 Employer (See instructions) HFA: Alameda School for Art + Design
Date 10/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Uel Trejo-Rivera	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 5606 Castle Knight Dr San Antonio, TX 78218-2310		
Principal occupation / Job title (See instructions) Community Equity Analyst		Employer (See instructions) Texas Housers
Date 10/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colton Uden	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 100 N Santa Rosa St #620 San Antonio, TX 78207		
Principal occupation / Job title (See instructions) Student		Employer (See instructions) UTSA
Date 11/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katy Bravenec	Amount of contribution (\$) 40.00
Contributor address; City; State; Zip Code 501 Shook Ave San Antonio, TX 78207		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) SAISD

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 11/7/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Long	7 Amount of contribution (\$) 17.00
6 Contributor address; City; State; Zip Code 2508 Tampico Street San Antonio, TX 78212		
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Jackson Walker LLP
Date 11/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huey Rey Fischer	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code 1130 E Quincy San Antonio, TX 78207		
Principal occupation / Job title (See instructions) Student		Employer (See instructions) None/Student
Date 11/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Colton Uden	Amount of contribution (\$) 15.00
Contributor address; City; State; Zip Code 100 N Santa Rosa St #620 San Antonio, TX 78247		
Principal occupation / Job title (See instructions) Social Work		Employer (See instructions) Martinez Street Women's Center
Date 11/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brittany Sharp	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 13638 Mason crest Dr San Antonio, TX 78238		
Principal occupation / Job title (See instructions) Graduate Student		Employer (See instructions) University of Texas at San Antonio4670

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
27 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
11/17/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

7 Amount of contribution (\$)
6.00

6 Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78207**

8 Principal occupation / Job title (See instructions)
Student

9 Employer (See instructions)
UTSA

Date
11/30/2022

Full name of contributor out-of-state PAC (ID# _____)
Colton Uden

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**100 N Santa Rosa St #620
San antonio, TX 78247**

Principal occupation / Job title (See instructions)
Social Work

Employer (See instructions)
Martinez Street Women's Center

Date
12/2/2022

Full name of contributor out-of-state PAC (ID# _____)
Ana Sandavol Campaign

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**PO Box 12412
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
12/2/2022

Full name of contributor out-of-state PAC (ID# _____)
Justin Rodriguez Campaign

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 100153
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 28 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 12/2/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joe Castillo III	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 303 Cass Ave San Antonio, TX 78204	
8 Principal occupation / Job title (See instructions) Sales		9 Employer (See instructions)
Date 12/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katy Bravenec	Amount of contribution (\$) 40.00
	Contributor address; City; State; Zip Code 501 Shook Ave San Antonio, TX 78212	
Principal occupation / Job title (See instructions) Chief of Staff		Employer (See instructions) City of San Antonio District 5
Date 12/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katy Bravenec	Amount of contribution (\$) 37.58
	Contributor address; City; State; Zip Code 1906 S Flores SAN ANTONIO, TX 75099	
Principal occupation / Job title (See instructions) Chief of Staff		Employer (See instructions) City of San Antonio District 6
Date 12/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gerald Lee	Amount of contribution (\$) 150.00
	Contributor address; City; State; Zip Code 8127 N New Braunfels #801 San Antonio, TX 78209	
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Andrade - Van de Putte & Associates



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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/15/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Brittany Sharp

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**13638 Mason crest Dr
San antonio, TX 78247**

8 Principal occupation / Job title (See instructions)
Social Work

9 Employer (See instructions)
Martinez Street Women's Center

Date
12/17/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
6.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

Date
12/20/2022

Full name of contributor out-of-state PAC (ID# _____)
Michael Siegel

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1905 Aggie Lane
Austin, TX 78757**

Principal occupation / Job title (See instructions)
Political Director

Employer (See instructions)
Ground Game Texas

Date
12/22/2022

Full name of contributor out-of-state PAC (ID# _____)
San Antonio Fire Fighters Association

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 100455
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 12/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vickie Willoughby	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 421 South General McMullen Drive San Antonio, TX 78237		
8 Principal occupation / Job title (See instructions) Inspector		9 Employer (See instructions) HUD/FEMA
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alejandra Lopez	Amount of contribution (\$) 450.00
Contributor address; City; State; Zip Code 118 Arlington Ct San Antonio, TX 78210		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) San Antonio Ind. School District
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anne R Donaldson	Amount of contribution (\$) 17.00
Contributor address; City; State; Zip Code 3324 18th Street Northwest #3 Washington, DC 20010		
Principal occupation / Job title (See instructions) Musician		Employer (See instructions) Baltimore Symphony Orchestra
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Chu de LeÃ³n	Amount of contribution (\$) 6.00
Contributor address; City; State; Zip Code 6302 Scribner Rd Houston, TX 77074		
Principal occupation / Job title (See instructions) Senior Advisor		Employer (See instructions) Harris County

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 31 of 42
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Date 12/27/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Chu de LeÃ³n	7 Amount of contribution (\$) 30.00
6 Contributor address; City; State; Zip Code 6302 Scribner Rd Houston, TX 77074		
8 Principal occupation / Job title (See instructions) Senior Advisor		9 Employer (See instructions) Harris County
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacqueline Campos	Amount of contribution (\$) 31.00
Contributor address; City; State; Zip Code 3811 Meeks Austin, TX 78210		
Principal occupation / Job title (See instructions) Deputy Field Organizer		Employer (See instructions) Jolt Action
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Karen Munoz	Amount of contribution (\$) 17.00
Contributor address; City; State; Zip Code 1000 N LBJ Drive #D6 San Marcos, TX 78666		
Principal occupation / Job title (See instructions) Digital Educator		Employer (See instructions) Hays-Caldwell Womens Center
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Isabella Chavez	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 5803 UTSA Drive San Antonio, TX 78249		
Principal occupation / Job title (See instructions) Design		Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
32 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Joey Castillo

7 Amount of contribution (\$)
140.00

6 Contributor address; City; State; Zip Code
**303 Cass Ave
San Antonio, TX 78204**

8 Principal occupation / Job title (See instructions)
sales

9 Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Karen Speer

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**143 Cumberland St
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Iris Castillo

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**303 Cass Ave
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Army

Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Norma Torres

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**110 Edinburg St
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
teacher

Employer (See instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
33 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Adrian Reyna

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**6021 Mike Mesmith
San Antonio, TX 78238**

8 Principal occupation / Job title (See instructions)
Aide

9 Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Manuel Rodriguez

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1117 Perez St
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Self Employed

Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Joanne Othon

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**939 S Frio St
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
self

Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Erica Benavides

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**4827 Cambay Dr
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
The Colao Group

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
34 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Megan Macias

7 Amount of contribution (\$)
60.00

6 Contributor address; City; State; Zip Code
**1212 Maverick St
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Organizer

9 Employer (See instructions)
TOP

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Derek Tulowitzky

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**100 N Santa Rosa #608
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Staffer

Employer (See instructions)
City of San Antonio

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Joe Castillo

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**303 Cass Avenue
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
CPS Energy

Employer (See instructions)
CPS Energy

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Manuel Garza

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**414 Remolino
San Antonio, TX 78237**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
35 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Omar Garcia

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**1502 Sunbend Falls
San Antonio, TX 78224**

8 Principal occupation / Job title (See instructions)
Not Employed

9 Employer (See instructions)
Not Employed

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Ishmael Abuabara

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**12 Florida Ave
Washington, DC 20002**

Principal occupation / Job title (See instructions)
Legislative Assistant

Employer (See instructions)
House of Representatives

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Andrew Hubbard

Amount of contribution (\$)
5.00

Contributor address; City; State; Zip Code
**3400 Magic Dr #126
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Pawn broker

Employer (See instructions)
Cash America pawn

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Timothy Price

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**558 Artemis
San Antonio, TX 78218**

Principal occupation / Job title (See instructions)
Minister

Employer (See instructions)
Northeast church of Christ

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
36 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Jeffrey Clemmons

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**201 I St SW #V729
Washington, DC 20024**

8 Principal occupation / Job title (See instructions)
Staff Assistant

9 Employer (See instructions)
US House of Representatives

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Sara Gerrish

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**107 Peters Ct
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Real Estate Broker

Employer (See instructions)
RE/MAX Unlimited

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Megan Joy Macias

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**1212 Maverick St
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Organizer

Employer (See instructions)
Texas Organizing Project

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Paris Moran

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**5939 Cecilyann
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
Digital Director

Employer (See instructions)
Sunrise Movement

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
37 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Paris Moran

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**5939 Cecilyann
San Antonio, TX 78253**

8 Principal occupation / Job title (See instructions)
Digital

9 Employer (See instructions)
Sunrise Movement

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Sarah Donaldson

Amount of contribution (\$)
30.00

Contributor address; City; State; Zip Code
**615 Naylor Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
TRLA

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Steve Newman

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**315 Barrera St
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Bar Owner

Employer (See instructions)
The Friendly Spot

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Ricardo Moreno

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**1508 Flanders Ave
San Antonio, TX 78211**

Principal occupation / Job title (See instructions)
Assistant Principal

Employer (See instructions)
Southside isd

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
38 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Justin Tullius

7 Amount of contribution (\$)
17.00

6 Contributor address; City; State; Zip Code
**218 Avant Ave
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)
Lawyer

9 Employer (See instructions)
Self

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Alex Birnel

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**624 W Magnolia Ave #1
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Advocacy Director

Employer (See instructions)
MOVE Texas

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Michelle Gonzalez

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**1803 Gaddis Blvd
San Antonio, TX 78225**

Principal occupation / Job title (See instructions)
Program Evaluator

Employer (See instructions)
SAISF

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Sarah Zimmerman

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**231 Locust St
Conway, AR 72034**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
SAISD

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
39 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Araceli ManrÃ-quez

7 Amount of contribution (\$)
17.00

6 Contributor address; City; State; Zip Code
**333 w Cevallos
San Antonio, TX 78204**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
Saisd

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Elizabeth Cardenas

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**14002 Fairoak Crossing
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Compliance Manager

Employer (See instructions)
SWBC

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Katy Bravenec

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**501 Shook Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Chief of Staff

Employer (See instructions)
City of San Antonio District 5

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Amador Salazar

Amount of contribution (\$)
31.00

Contributor address; City; State; Zip Code
**6503 Arrid Pass
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
Graduate Student

Employer (See instructions)
University of Texas at San Antonio4670

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
40 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/27/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Gina Cramer

7 Amount of contribution (\$)
31.00

6 Contributor address; City; State; Zip Code
**2234 Fresno
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)
Evaluation Coordinator

9 Employer (See instructions)
META Consultants

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Amy Kastely

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**233 Lotus Ave
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Retired Professor

Employer (See instructions)
Self

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Ric Galvan

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**3311 Meadow Dr
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)
cosad5

Employer (See instructions)

Date
12/27/2022

Full name of contributor out-of-state PAC (ID# _____)
Natalie Clifford

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**514 Westwood Drive
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Local School District

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
41 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/28/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Rita Constante

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**11713 Natrona Dr
Austin, TX 78759**

8 Principal occupation / Job title (See instructions)
Program manager

9 Employer (See instructions)
Apple Inc.

Date
12/28/2022

Full name of contributor out-of-state PAC (ID# _____)
Jaime C Herrejon

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**514 W Commerce
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Little Mexico Imports

Date
12/28/2022

Full name of contributor out-of-state PAC (ID# _____)
Carlos Herrejon

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**361 Saratoga Drive
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Retail business

Employer (See instructions)
Owner

Date
12/30/2022

Full name of contributor out-of-state PAC (ID# _____)
Bernardino Villasenor

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**139 Nightingale St
San Antonio, TX 78226**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
42 of 42

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date
12/31/2022

5 Full name of contributor out-of-state PAC (ID# _____)
Maria Velazquez

7 Amount of contribution (\$)
30.00

6 Contributor address; City; State; Zip Code
**9527 Summerbrook
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)
Not Employed

9 Employer (See instructions)
Not Employed

Date
12/31/2022

Full name of contributor out-of-state PAC (ID# _____)
Colton Uden

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**100 N Santa Rosa St #620
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Student

Employer (See instructions)
UTSA

Date
12/31/2022

Full name of contributor out-of-state PAC (ID# _____)
Rey Saldaña

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**8902 Victoria Lake
San Antonio, TX 78224**

Principal occupation / Job title (See instructions)
Non-Profit Leader

Employer (See instructions)
Communities In Schools National

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code	8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1 of 1
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation (See instructions)		21 Employer (See instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial institution?	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation (See instructions)		Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 1 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 7/7/2022	5 Payee name ActBlue	
6 Amount (\$) 31.15	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising Platform
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 7/11/2022	Payee name VANTIV eCommerce		
Amount (\$) 42.04	Payee address; City; State; Zip Code 900 Chelmsford St Lowell, MA 01851		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Transfer service	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date 7/14/2022	Payee name TOSKR, INC DBA Getthru		
Amount (\$) 885.68	Payee address; City; State; Zip Code PO Box 2690 Alameda, CA 94501-0690		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Communications	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 8/5/2022	5 Payee name ActBlue	
6 Amount (\$) 1.83	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising Platform
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date 8/8/2022	Payee name Hyatt Regency Denver C Denver CO		
Amount (\$) 7.00	Payee address; City; State; Zip Code 650 15th St Denver, CO 80202		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Coffee	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 8/9/2022	Payee name VANTIV eCommerce		
Amount (\$) 6.52	Payee address; City; State; Zip Code 900 Chelmsford St Lowell, MA 01851		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Transfer Service	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 9/6/2022	5 Payee name ActBlue	
6 Amount (\$) 20.19	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Fundraising Platform
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date 9/9/2022	Payee name VANTIV eCommerce		
Amount (\$) 12.34	Payee address; City; State; Zip Code 900 Chelmsford St Lowell, MA 01851		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Transfer service	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 10/5/2022	Payee name ActBlue		
Amount (\$) 1.18	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 10/11/2022	5 Payee name PRESTIGE PRINTING, LLC	
6 Amount (\$) 1217.81	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 10/12/2022	Payee name Regina Morales		
Amount (\$) 150.00	Payee address; City; State; Zip Code 209 Alamosa Ave San Antonio, TX 78210		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Art	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date 11/7/2022	Payee name ActBlue		
Amount (\$) 19.36	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 11/9/2022	5 Payee name VANTIV eCommerce	
6 Amount (\$) 15.65	7 Payee address; City; State; Zip Code 900 Chelmsford St Lowell, MA 01851	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Transfer fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date 11/29/2022	Payee name SELF BRANDED SA		
Amount (\$) 410.00	Payee address; City; State; Zip Code PO Box 769795 San Antonio, TN 78245		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Printing	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date 11/30/2022	Payee name PRESTIGE PRINTING, LLC		
Amount (\$) 1818.60	Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Printing	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 12/6/2022	5 Payee name MailChimp	
6 Amount (\$) 21.32	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE #5000 Atlanta , GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Communications	(b) Description Communications
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 12/9/2022	Payee name VANTIV eCommerce		
Amount (\$) 7.49	Payee address; City; State; Zip Code 900 Chelmsford St Lowell, MA 01851		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Transfer fees	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date 12/12/2022	Payee name GoDaddy		
Amount (\$) 30.16	Payee address; City; State; Zip Code 2155 Go Daddy Way Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Website	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 7	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date 12/12/2022	5 Payee name GoDaddy	
6 Amount (\$) 204.54	7 Payee address; City; State; Zip Code 2155 GoDaddy Way Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 12/27/2022	Payee name SELF BRANDED SA		
Amount (\$) 390.00	Payee address; City; State; Zip Code PO Box 769795 San Antonio, TX 78245		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Printing	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking
 Advertising Expense
 Consulting Expense
 Contributions/Donations Made By
 Candidate/Officeholder/Political Committee

Event Expense
 Fees
 Food/Beverage Expense
 Gifts/Awards/Memorials Expense
 Legal Services

Loan Repayment/Reimbursement
 Office Overhead/Rental Expense
 Polling Expense
 Printing Expense
 Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
 Transportation Equipment & Related Expense
 Travel in District
 Travel Out Of District
 Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
--	-------------

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

.....
6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....
Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
--	---	--

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
--	-------------

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule G: 1 of 1	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Mrs Teri M Castillo	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
1 of 1

2 FILER NAME
Mrs Teri M Castillo

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
 6 Address of person from whom amount is received; City; State; Zip Code	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
 Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Mrs Teri M Castillo		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

**The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••**

C/OH NAME
Mrs Teri M Castillo

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder